

Applicants respectfully submit that the entire delay in filing the required reply from the due date for the reply until the filing of this petition was unintentional.

A favorable decision on this Petition is respectfully requested.

Please charge the amount of \$1,540 for payment of the fee under 37 C.F.R. 1.17(m) for filing this Petition to Revive under 37 C.F.R. §1.137(b) to Deposit Account No. 11-0600.

The Commissioner is hereby authorized to charge any additional fees and/or to credit any overpayment in connection with these papers transmitted herewith, to Deposit Account No. 11-0600. Since the error in this matter was solely due to an error by the USPTO, Applicants respectfully request a refund of its petition fee should the USPTO agree with Applicants regarding the source of error. A copy of this communication is enclosed for charging purposes.

Respectfully submitted,  
KENYON & KENYON LLP

Dated: Oct 3, 2007

By: Linda Shudy Lecomte  
Linda Shudy Lecomte  
(Reg. No. 47,084)

Adjustment date: 03/25/2008 CKHLOK  
10/09/2007 HGBREH1 00000004 110600 09673520  
OFFICE: 1453 1540.00 CR

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**UNITED STATES PATENT & TRADEMARK OFFICE**  
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND																
1 Date of Request: 03/17/08				2 Serial/Patent # 09/673,520												
3 Please refund the following fee(s):				4 PAPER NUMBER		5 DATE FILED		6 AMOUNT								
	Filing							\$								
	Amendment							\$								
	Extension of Time							\$								
	Notice of Appeal/Appeal							\$								
X	Petition					10/03/07		\$ 1,540.00								
	Issue							\$								
	Cert of Correction/Terminal Disc.							\$								
	Maintenance							\$								
	Assignment							\$								
	Other							\$								
				7 TOTAL AMOUNT OF REFUND				\$ 1,540.00								
				8 TO BE REFUNDED BY:												
10 REASON:				Treasury Check												
	Overpayment			Credit Deposit A/C #:												
	Duplicate Payment			9 <table border="1" style="display: inline-table; border-collapse: collapse; text-align: center;"> <tr> <td style="width: 20px;">1</td> <td style="width: 20px;">1</td> <td style="width: 20px;">--</td> <td style="width: 20px;">0</td> <td style="width: 20px;">6</td> <td style="width: 20px;">0</td> <td style="width: 20px;">0</td> </tr> </table>						1	1	--	0	6	0	0
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X	No Fee Due (Explanation):															
11 REFUND REQUESTED BY:																
TYPED/PRINTED NAME: Tredelle Jackson				TITLE: Paralegal												
SIGNATURE:				PHONE: 2-2783												
OFFICE: Office of Petitions																
***** THIS SPACE RESERVED FOR FINANCE USE ONLY: *****																
APPROVED:				DATE: 3/25/08												

*Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:*

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